Additionally, the specification has been amended as shown above in order to correct clerical errors. The applicants submit that a person of ordinary skill in the art would understand the clerical nature of the errors when reading the present specification as a whole.

No new matter has been added.

Entry of this amendment and favorable consideration of this application are respectfully requested.

Respectfully submitted,

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APPENDIX

VERSION WITH MARKINGS TO SHOW CHANGES MADE

IN THE SPECIFICATION:

Proposed Amendments To The Following Paragraphs Of The Specification Showing Deletions And Insertions.

Page 1, paragraph starting at line 5

This invention relates to diagnostic methods and a diagnostic aid for judging the onset and progress of diseases associated with a change in the coupling factor (CF6) level in the blood, diseases in association with the excess or shortage of PGI_2 or diseases associated with the accentuation or attenuation of $cPLA_2$ function, which may be referred to as $cPLA_2$ hyperfunction or $cPLA_2$ hypofunction and a pharmaceutical composition for the treatment of these diseases. The present invention further relates to a vector containing a DNA encoding CF6 or a polypeptide which is a part thereof, a transformant having been transformed by this vector, a method of efficiently producing CF6 and a partial polypeptide thereof, an antibody reacting specifically with CF6, a method for producing the antibody, and a method of assaying CF6.

Page 14, paragraph starting at line 8

The term "diseases associated with the excess of CF6" as used herein means diseases wherein the function of CF6 in the blood is accentuated to a level undesirable for a living body. Namely, these diseases are not always restricted to those wherein the blood CF6 level is higher than the level of normal persons.

Namely, diseases associated with the shortage of PGI_2 and diseases associated with the attenuation of the $cPLA_2$ function or the $cPLA_2$ hypofunction fall within this category. Examples thereof include diseases associated with accentuated platelet agglutination, diseases associated with peripheral circulatory failure caused by inhibited vasodilatation, heart infarction, angina pectoris, heart failure, pulmonary hypertension, hypertension, cerebrovascular disorder, arteriosclerosis obliterans, arteriosclerosis, hyperlipemia, diabetes, bronchial disease, stomach ulcer, eclampsia of pregnancy, hemolytic-uremic syndrome and thrombotic thrombocytopenic purpura.

Page 14-15, paragraph starting at line 26 of page 14

The term "diseases associated with the shortage of CF6" as used herein means diseases wherein the function of CF6 in the blood is attenuated to a level undesirable for living body. Namely, these diseases are not always restricted to those wherein the blood CF6 level is lower than the level of normal persons. Namely, diseases associated with the excess of PGI_2 and diseases associated with the accentuation of the $cPLA_2$ function or $cPLA_2$ hyperfunction fall within this category. Examples thereof include brain infarction, acute pancreatitis, asthma, ARDS and rheumatoid arthritis.

IN THE CLAIMS:

Proposed Amendments To Claims 3, 6, 7, 9, 10, 12, 17 and 19 Showing Deletions And Insertions.

Claim 3. (Amended) A pharmaceutical composition for the prevention or the treatment as claimed in claim 1 [or 2] wherein said disease associated with the excess of CF6 in the blood is heart infarction, angina pectoris, heart failure, pulmonary hypertension, hypertension, cerebrovascular disorder, arteriosclerosis obliterans, arteriosclerosis, hyperlipelflia, diabetes, bronchial disease, stomach ulcer, eclampsia of pregnancy, hemolytic-uremic syndrome or thrombotic thrombocytopenic purpura.

Claim 6. (Amended) The pharmaceutical composition for the prevention or the treatment as claimed in claim 4 [or 5] wherein said disease associated with the shortage of CF6 in the blood is an inflammatory disease such as brain infarction, acute pancreatitis, asthma, ARDS or rheumatoid arthritis.

Claim 7. (Amended) A pharmaceutical composition for the prevention or the treatment of a disease associated with the shortage of PGI_2 and/or a disease associated with the attenuation of the Ca^{2+}-dependent cytoplasmic PLA_2 ($cPLA_2$) [function] hypofunction, which comprises a CF6 inhibitor as the active ingredient.

Claim 9. (Amended) A pharmaceutical composition for the prevention or the treatment as claimed in claim 7 [or 8] wherein said disease associated with the shortage of PGI_2 and/or the disease associated with the [attenuation of] the $cPLA_2$ [function] hypofunction is heart infarction, angina pectoris, heart failure, pulmonary hypertension, hypertension, cerebrovascular disorder, arteriosclerosis obliterans, arteriosclerosis, hyperlipemia, diabetes, bronchial disease, stomach

ulcer, eclampsia of pregnancy, hemolytic-uremic syndrome or thrombocytopenic purpura.

Claim 10. (Amended) A pharmaceutical composition for the prevention or the treatment of a disease associated with the excess of PGI_2 and/or a disease associated with the $cPLA_2$ hyperfunction, which comprises a CF6 activator or CF6 as the active ingredient.

Claim 12. (Amended) A pharmaceutical composition for the prevention or the treatment as claimed in claim 10 [or 11] wherein said disease associated with the [shortage] excess of PGI_2 and/or a disease associated with the $cPLA_2$ hyperfunction is an inflammatory disease such as brain infarction, acute pancreatitis, asthma, ARDS or rheumatoid arthritis.

Claim 17. (Amended) A diagnostic method of judging the susceptibility to a disease associated with an increase or decrease in the CF6 level in the blood, which involves the step of determining the presence/absence of a [variation] mutation in a gene sequence in the CF6 gene [domain] region in the genome of a [patient] subject.

Claim 19. (Amended) The diagnostic method as claimed in claim 17 wherein said disease with an increase or decrease in the CF6 level in the blood is a disease associated with the [accentuation or attenuation of] $cPLA_2$ [function] hyperfunction or the $cPLA_2$ hypofunction.